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PTO/SB/82 (01-06)
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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

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Application Number	10/809,004
Filing Date	03/25/2004
First Named Inventor	Chen, Shoupu
Art Unit	
Examiner Name	
Attorney Docket Number	87976SLP

I hereby revoke all previous powers of attorney given in the above-identified application.			
A Power of Attorney is submitted herewith.			
OR			
I hereby appoint the practitioners associated with the Customer Number: 70523			
Please change the correspondence address for the above-identified application to:			
The address associated with Customer Number: 70523			
OR			
Firm or Individual Name			
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City State Zip			
Country			
Telephone Email			
am the:  Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
signature Mul Slove //1.			
ame Mark G. Bocchetti, Assistant General Counsel and Director, Patent Legal Staff, Eastman Kodak Company			
Date May 10, 2007 Telephone (585) 477-3395			
OTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one			
*Total of 2 forms are submitted.  This collection of information is sourced by 37 CFR 4.00. This is a second of the second of th			

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/95 (04-07) Approved for use through 09/30/2007. OMB 0651-0031

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TRACELAR	STATEMENT UNDER 37 CFR 3.7	<u>73(b)</u>
Applicant/Patent Owner: _Eastman Kodak (	Company	
Application No./Patent No.: 10/809,004	Filed/Issue Date: 03/25/2	004
Entitled: METHOD AND SYSTEM FOR AUT	OMATIC IMAGE ADJUSTMENT FOR IN V	IVO IMAGE DIAGNOSIS
Eastman Kodak Company (Name of Assignee)	, a <u>New Jersey Company</u> (Type of Assignee, e.g., corp	oration, partnership, university, government agency, etc.)
states that it is:  1.  the assignee of the entire right, title	, and interest; or	
an assignee of less than the entire     (The extent (by percentage) of its or	right, title and interest	
in the patent application/patent identified	above by virtue of either:	
thereof is attached.	of the patent application/patent identificemark Office at Reel,	ed above. The assignment was recorded Frame, or for which a copy
OR B. A chain of title from the inventor(s),	of the patent application/patent identific	ed above, to the current assignee as follows:
Reel _15152, Frame _7  2. From: The document was recorded	To: Eastman Kodak of In the United States Patent and Trade 82-784, or for which a compared to the United States Patent and Trade me, or for which a	opy thereof is attached.
3. From: The document was recorded	To:To:To:To:	mark Office at
	mme, or for which	
	in of title are listed on a supplemental s the documentary evidence of the chain bmitted for recordation pursuant to 37	of title from the original owner to the
[NOTE: A separate copy (i.e., a true of Division in accordance with 37 C 302.08]	copy of the original assignment docume FR Part 3, to record the assignment in	ent(s)) must be submitted to Assignment the records of the USPTO. See MPEP
The undersigned (whose the is supplied to	elow) is authorized to act on behalf of	the assignee.  May 10,2007
Sign	nature	Date
Mark G. Bocchetti: As	sistant General Counsel	(585) 477-3395

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application for the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Printed or Typed Name

Director Patent Legal Staff, Eastman Kodak Company Title



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor:

Shoupu Chen

METHOD AND SYSTEM FOR AUTOMATIC IMAGE ADJUSTMENT FOR IN VIVO IMAGE DIAGNOSIS

Serial No. 10/809,004

Filed: March 25, 2004

Commissioner for Patents P.O. Box 1450 Alexandria, VA. 22313-1450

Sir:

I hereby certify that this correspondence is being deposited today with the United States Postal Service as first class mail in an envelope addressed to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Drew Little

Date

## RESUBMITTAL OF REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE

Applicant previously submitted a Revocation of Power of Attorney With New Power of Attorney and Change of Correspondence Address for the above-identified patent application. However, since Applicant's USPTO Registration Number was not recorded under Applicant's Customer Number of 70523 (Carestream Health, Inc), the Revocation of Power of Attorney With New Power of Attorney and Change of Correspondence Address was not recorded by the USPTO.

Applicant's USPTO Registration Number is now properly recorded under Applicant's Customer Number of 70523 (Carestream Health, Inc).

Applicant hereby resubmits a copy of the Revocation of Power of Attorney With New Power of Attorney and Change of Correspondence Address, and requests that it be recorded.

Respectfully submitted,

Susan L. Parulski/dll Carestream Health, Inc.

Telephone: 585-724-9401 Facsimile: 585-724-9400

Registration No. 39,324

If the Examiner is unable to reach the Applicant(s) Attorney at the telephone number provided, the Examiner is requested to communicate with Carestream Health, Inc. at 585/724-9409 or 585/724-9490.